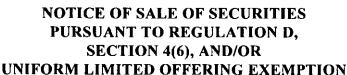
# **FORM D**

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# **FORM D**



1394949							
	OMB APPROVAL						
	OMB Number: 3235-007	76					
	Expires:	J					
	Estimated average burden						

SEC USE ONLY					
Prefix	Serial				
DATE R	ECEIVED				
	1				

hours per response. . . . . 16.00

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):	ULOE AND YOU
Type of Filing:  New Filing  Amendment	RECEIVED
A. BASIC IDENTIFICATION DATA	1 May & 7 2007
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
IRE-EE, LLC	188/38
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
114 Eldridge Avenue, Mill Valley, CA 94941	415-383-4454
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	<i>D</i>
Video game development	D PROCESS
Type of Business Organization	SEDSEN.
☐ corporation ☐ limited partnership, already formed     ✓ other (p	olease specify):
business trust   limited partnership, to be formed   limited liab	ility company APR 0 2 2007
Month Year	200/
	nated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	Eillaan '
CN for Canada; FN for other foreign jurisdiction)	DIE FINANCIAL

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Mihaly, Matthew Business or Residence Address (Number and Street, City, State, Zip Code) 35 Miller Avenue, #227, Mill Valley, CA 94941 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Christopher Kohnert Business or Residence Address (Number and Street, City, State, Zip Code) 4327 Lake Washington BLvd NE, Apt 6207, Kirkland, WA 98033 Check Box(es) that Apply: Promoter ▼ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) **Outset Consulting** Business or Residence Address (Number and Street, City, State, Zip Code) 119 Hannaford Street, Toronto, Ontario, M4E 3G9 CANADA Check Box(es) that Apply: ✓ Beneficial Owner Promoter Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Iron Realms Entertainment LLC Business or Residence Address (Number and Street, City, State, Zip Code) 35 Miller Avenue, #227, Mill Valley, CA 94941 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В. І	NFORMAT	TON ABOU	JT OFFER	ING				
	TT .1						17. 1					Yes	No
1.	Has the	issuer sol	d, or does			ell, to non-a				·	***************	<u>X</u>	Li
2.	Answer also in Appendix, Column 2, if filing under ULOE.					s 10	,000.00						
۷.	2. What is the minimum investment that will be accepted from any individual?					3 Yes	No						
3.	Does the offering permit joint ownership of a single unit?												
4.	If a person state a broke	ssion or sim son to be lis s, list the na er or dealer	nilar remuno sted is an as ame of the l , you may s	eration for sociated po broker or d set forth th	solicitatior erson or ag ealer. If m	who has be n of purchas ent of a bro ore than fiv ion for that	ers in conn ker or deale e (5) perso	ection with er registere ns to be lis	sales of se d with the t ted are asso	curities in t SEC and/or	the offerin with a sta	g. te	
Full	Name (	Last name	first, if ind	lividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, Z	Zip Code)						
Nan	ne of As	sociated B	roker or Do	ealer			·						
Stat	es in Wi	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	:					
	(Check	"All State:	s" or check	individua	l States)	•••••		• • • • • • • • • • • • • • • • • • • •	•••••			🔲 Al	II States
	AL	[AK]	ΑZ	ĀŔ	CA	CO	CT	DE	DC	FL	GA	HI	ΗD
	IL MT RI	IN NE SC	IA NV SD	KS NH TN	KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OH WV	MN OK WI	MS OR WY	MO PA PR
Full	Name (	Last name	first, if ind	ividual)									
Busi	iness or	Residence	Address (	Number an	d Street, C	City, State,	Zip Code)					<del></del>	
					· 		,						
Nam	ne of As	sociated Bi	roker or De	aler									
State	es in WI	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						<del></del> -
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	IL	IN	IA	KS	KY	LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MΤ	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	$\overline{WY}$	PR
Full	Name (	Last name	first, if ind	ividual)	<u> </u>			<del></del> .	· ···-				
Busi	iness or	Residence	Address (	Number an	d Street, C	ity, State, 2	Zip Code)					-	
Nam	ne of Ass	sociated Br	oker or De	aler		<u> </u>		·	<del></del>				
State	es in Wh	ich Person	Listed Ha	Solicited	or Intende	to Solicit	Durchagara						
									***************************************			.   All	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Deht	s 0.00	s 0.00
		§ 0.00	§ 0.00
	☐ Common ☐ Preferred		- · · <u></u>
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify Series B LLC Units )		\$ 185,000.00
	Total		s 185,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	·	- Ψ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors	2	§ 65,000.00
	Non-accredited Investors	5	<u>\$_120,000.00</u>
	Total (for filings under Rule 504 only)	7	\$_185,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$_0.00
	Regulation A	N/A	\$ 0.00
	Rule 504	LLC Class B	\$ 185,000.00
	Total		\$_185,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0.00
	Printing and Engraving Costs		\$ 0.00
	Legal Fees		\$ 0.00
	Accounting Fees	ليجا	\$ 0.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)		\$ 0.00
	Total	_	\$ 0.00

the	information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exceedited investor pursuant to parag	change Commission, upon wraph (b)(2) of Rule 502.	ritten request of its staff,
The sig	issuer has duly caused this notice to be signed by that the constitutes an undertaking by the issuer to fi	ne undersigned duly authorized perso urnish to the U.S. Securities and Exc	on. If this notice is filed unde	r Rule 505, the following
		D. FEDERAL SIGNATURE		_
	Total Payments Listed (column totals added)	185,000.00		
	Column Totals		\$ <u>0.00</u>	\$ 185,000.00
				<b>Z</b> \$
	Other (specify):			
	Working capital			
	Repayment of indebtedness			_
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	sets or securities of another		\$
	Construction or leasing of plant buildings and fa		·	
	Purchase, rental or leasing and installation of mand equipment	achinery		71\$
	Purchase of real estate		\$ 🗾	<b>/</b> \$
	Salaries and fees			
			Payments Officers Directors, Affiliates	k. Payments to
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pa	any purpose is not known, furnish a of the payments listed must equal the	in estimate and	
	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C – proceeds to the issuer."	<ul> <li>Question 4.a. This difference is the</li> </ul>	"adjusted gross	\$185,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 $\mathcal{END}$ 

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)